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CONFIRMATION NO. 3099

<b>SERIAL NUMBER</b> 10/612,463	<b>FILING OR 371(c) DATE</b> 07/01/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1617	<b>ATTORNEY DOCKET NO.</b>
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**APPLICANTS**

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 Helmer P.K. Agersborg, Blue Bell, PA;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 09/138,448 08/21/1998 PAT 6,630,515  
 which claims benefit of 60/057,385 08/28/1997

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

09/26/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> PORTUGAL	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 4	<b>INDEPENDENT CLAIMS</b> 1
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

Mount Cook Biosciences, Inc.  
 787 7th Avenue, 48th Floor  
 New York, NY 10019

**TITLE**

Urinary incontinence therapy

<b>FILING FEE RECEIVED</b> 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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